

Please type a plus sign (+) inside this box → ☐



AF/1651\$

PTO/SB/21 (08-00)

Approved for use through 10/31/2002. OMB 0651-0031

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

<b>TRANSMITTAL FORM</b>  (to be used for all correspondence after initial filing)	<b>Application Number</b>	09/420,695	
	<b>Filing Date</b>	October 19, 1999	
	<b>First Named Inventor</b>	Yasmin Thanavala	
	<b>Group Art Unit</b>	1651	
	<b>Examiner Name</b>	M. Flood	
<b>Total Number of Pages in This Submission</b>	4	<b>Attorney Docket Number</b>	RPP:156A

**RECEIVED**  
FEB 07 2001

ENCLOSURES (check all that apply)		TECH CENTER 1600/2900
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <div>Remarks</div>	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input checked="" type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	Michael L. Dunn
Signature	
Date	2 Feb 2001

CERTIFICATE OF MAILING	
I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, Washington, DC 20231 on this date: 2 Feb 2001	
Typed or printed name	Michael L. Dunn
Signature	
Date	2 Feb 2001

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

RECEIVED

FEB 05 2001

Patent fees are subject to annual revision.

<b>TOTAL AMOUNT OF PAYMENT</b>	<b>(\$)</b> 210.00
--------------------------------	--------------------

Application Number	09/420,695
Filing Date	October 19, 1999
First Named Inventor	Yasmin Thanavala
Examiner Name	M. Flood
Group Art Unit	1651
Attorney Docket No.	RPP:156A US

TECH CENTER 1600/2900

### FEE CALCULATION (continued)

- ### 3. ADDITIONAL FEES

04-1790

☒

7

2. ☒ **Payment Enclosed:**



Check	Credit Card	Money Order	Other
-------	-------------	-------------	-------

115    110    215    55

## 116 390 216 195

Free Paid

101	710	201	355	Utility filing fee
106	320	206	160	Design filing fee
107	490	207	245	Plant filing fee
108	710	208	355	Reissue filing fee
114	150	214	75	Provisional filing fee

SUBTOTAL (1)

(\$).

117	890	217	445	Extension for reply within third month
-----	-----	-----	-----	--

			Extra Claims		Fee from below		Fee Paid
Total Claims	<input type="text"/>	-20** =	<input type="text"/>	X	<input type="text"/>	=	<input type="text"/>
Independent Claims	<input type="text"/>	-3** =	<input type="text"/>	X	<input type="text"/>	=	<input type="text"/>
Multiple Dependent					<input type="text"/>	=	<input type="text"/>

Large Fee Code	Entity Fee (\$)	Small Fee Code	Entity Fee (\$)	Fee Description
103	18	203	9	Claims in excess of 20
102	80	202	40	Independent claims in excess of 3
104	270	204	135	Multiple dependent claim, if not paid
109	80	209	40	**Reissue independent claims over original patent
110	18	210	9	**Reissue claims in excess of 20 and over original patent

**SUBTOTAL (2)**

(\$).

\*\*or number previously paid, if greater; For Reissues, see above

118	1,390	218	695	Extension for reply within fourth month
128	1,890	228	945	Extension for reply within fifth month
119	310	219	155	Notice of Appeal
120	310	220	155	Filing a brief in support of an appeal
121	270	221	135	Request for oral hearing
138	1,510	138	1,510	Petition to institute a public use proceeding
140	110	240	55	Petition to revive - unavoidable
141	1,240	241	620	Petition to revive - unintentional
142	1,240	242	620	Utility issue fee (or reissue)
143	440	243	220	Design issue fee
144	600	244	300	Plant issue fee
122	130	122	130	Petitions to the Commissioner
123	50	123	50	Processing fee under 37 CFR 1.17(q)
126	180	126	180	Submission of Information Disclosure Statement
581	40	581	40	Recording each patent assignment per property (times number of properties)
146	710	246	355	Filing a submission after final rejection (37 CFR § 1.129(a))
149	710	249	355	For each additional invention to be examined (37 CFR § 1.129(b))
179	710	279	355	Request for Continued Examination (RCE)
169	900	169	900	Request for expedited examination of a design application

**Other fee (specify)**

**\*Reduced by Basic Filing Fee Paid**

<b>SUBTOTAL (3)</b>	<b>(\$)</b> 210.00
---------------------	--------------------

SUBMITTED BY

Complete (if applicable)

Name (Print/Type)

## Michael L. Dunn

Registration No. **25,330**  
(Attorney/Agent)

Telephone

**716-433-1661**

Signature \_\_\_\_\_

Date \_\_\_\_\_

2 Feb 2001

**WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.**

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.